

POSITION	INITIALS	IS NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2-21-01
FORMALITY REVIEW	H-T	913	03/06/01
RESPONSE FORMALITY REVIEW	peb	1080	6-25-01

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✓ ..... Rejecter  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restrict

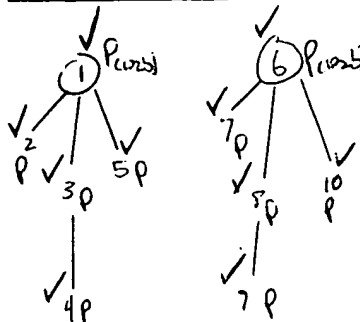
**SINGULAR**  
 (MONTELUKAST SODIUM)

Claim Tied

Claim	Date
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Claim	Date
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Claim	Date
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No - Final



If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY

*Handwritten initials and date: 3/7/01*

IT 41913